

SECRET
(When Filled In)

VOUCHER NO. 7-12		REQUEST FOR PAYMENT AND POSTING VOUCHER				VOUCHER NO. 7-12	
TO : Finance Division, Accounts Branch THROUGH: Monetary Branch						DIVISION VOUCHER NO. 2 Oct 63 1228	
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.							
SUBJECT PAYMENT TO <i>Sanders Associates, Inc.</i> AMOUNT \$ 8,918.72						INVOICE NO(S). 27 CONTRACT NO. AF-33(657)8582 CHECK TO BE DATED	
CASH PAYMENT		<input checked="" type="checkbox"/> U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK	
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.							
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$				OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.			
DATE		SIGNATURE OF PAYEE		DATE		SIGNATURE OF AGENT	
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		34-39 STATION CODE		40-42 EXPEND CODE		43-46 PAY PER. LIQ. CODE	
28-33 T/A NO.		PROP. NO.		FY		47-52 OBLIG. REF. NO.	
P.O. NO.		PROJECT NO.				53 CA 54-57 GENERAL LEDGER ACCT. NO.	
32-33 DIV.						58-67 ALLOT. OR COST ACCT. NO.	
DESCRIPTION-ADVANCE ACCOUNTS 13-27						62-67 CK. NO. X REF. NO.	
<i>Sanders Associates Inc</i> 1420				887		601.0 61-0572-0009 740 8,918.72 110	
						138.0 8,918.72	
Original + 1 addresser 1 Contact WH-1420 (Post) 1 Voucher							
PREPARED BY		DATE		AUTHORIZED CERTIFYING OFFICER		DATE	
		20913		/S/		TOTALS 8,918.72 8,918.72	

Standard Form No. 1034
7 GAO 5030
1034-106-02**PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL**

O. VOU. NO. _____

BU. VOU. NO. _____

U. S. _____
DEPARTMENT OF THE NAVY
(Department, bureau, or establishment)Voucher prepared at NASHUA, NEW HAMPSHIRE SEPT 23, 1963
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO SANDERS ASSOCIATES, INC
(Payee)
P O BOX 860 CHURCH ST STATION
(Address) NEW YORK 8, NEW YORK

PAID BY

Contract No. AF33(657)8582 Date _____Shipped from LOT 11 to _____

Req. No. _____

Weight _____

Date _____

Invoice Rec'd. _____

Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
	16 AUG THRU 20 SEPT 1963	FORWARD FROM ANALYSIS OF COSTS SUPPLEMENT INVOICE NO 1XFP-13-21457				\$8,918.72
TOTAL						\$8,918.72

PAYMENT:

COMPLETE ☐

PARTIAL ☐

FINAL ☐

PROGRESS ☐

ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____

Amount verified; correct for _____

(Signature or initials) _____

STAT approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE

ACCOUNTING CLASSIFICATION

Appropriation Symbol and Subhead	Object Class	Expenditure Account	Chargeable Activity	Bureau Control Activity No.	Bureau Control No.	Subauthorization		Amount
						Activity	Number	

I.R.No's. _____

Project Order Date _____

Paid by { Check No. _____ on Treasurer of the United States

Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____

U.S. DEPARTMENT OF THE AIR FORCE				CONTRACT NUMBER	AF 33(657)8582 Lot 11
GROSS COSTS INCURRED AND FEE EARNED				CURRENT CLAIM	CUM. TO DATE
MATERIAL, SUBCONTRACTING, STATLANT EQUIPMENT	MATERIAL FOR END PRODUCT			\$ (30.00)	\$ 7,203.16
	MATERIAL FOR SPECIAL TOOLING FABRICATED AND PURCHASED				
	OTHER MATERIAL				
	SUBCONTRACTING	COST - TYPE SUBCONT. COSTS			
		FIXED - PRICE REDETERMINABLE			
	TERMINATION SETTLEMENT COSTS - SUBCONTRACTS				
		PLANT CLASS (3) EQUIP.			
		INDUST'L CLASS (4) PROD. EQUIP.			
		MINOR PLANT EQUIPMENT			
	TOTAL: SUBJECT TO MATERIAL HANDLING OVERHEAD				
MATERIAL HANDLING OVERHEAD			(1.65)	392.41	
DIRECT LABOR	DIRECT LABOR THRU 1/31/63				2,158.91
	ENGINEERING LABOR			3,006.15	22,230.19
	PRODUCTION LABOR				226.82
	LABOR ON SPECIAL TOOLING FABRICATED				726.80
	OTHER DIRECT LABOR			886.94	2,486.94
	MFG. OVERHEAD THROUGH 1/31/63				2,417.98
OVERHEAD	ENGINEERING OVERHEAD			3,216.58	23,786.29
	PRODUCTION OVERHEAD				189.26
	OVERHEAD ON SPECIAL TOOLING FABRICATED				472.42
	OTHER DIRECT OVERHEAD			576.51	1,616.51
	OVERTIME PREMIUM				25.48
	TRANSPORTATION OF THINGS				
OTHER DIRECT CHARGES (TRAVEL, COMMUNICATION, ETC.)			67.31	2,750.96	
TOTAL MANUFACTURING COST			\$ 7,721.84	\$ 66,684.13	
GENERAL AND ADMINISTRATIVE EXPENSE			386.09	3,334.20	
TOTAL MANUFACTURING COST AND G & A			\$ 8,107.93	\$ 70,018.33	
FIXED FEE			810.79	7,001.83	
TOTAL GROSS BILLING			\$ 8,918.72	\$ 77,020.16	
ADD: RESUBMISSION OF COSTS			~		
TOTAL CURRENT CLAIM FOR REIMBURSEMENT			\$ 8,918.72		

FEE EARNED, PERIOD

8/16 - 9/20

Sanitized Copy Approved for Release 2011/02/22 : CIA-RDP89B00709R000300600026-2
(When Filled In)

VOUCHER NO. 7-12		REQUEST FOR PAYMENT AND POSTING VOUCHER										VOUCHER NO. 7-12																			
TO : Finance Division, Accounts Branch										DIVISION VOUCHER NO.																					
THROUGH: Monetary Branch										21 Nov 63 1914																					
Request payment be made and/or transaction be recorded as indicated below. Pertinent documentation in support of this transaction is on file in this office.																															
SUBJECT										INVOICE NO(S).																					
PAYMENT TO <i>Sanctus Association Inc.</i>										CONTRACT NO. AF-33(657) 5582																					
AMOUNT \$ 14,332.77										CHECK TO BE DATED																					
CASH PAYMENT		* U.S. TREASURY CHECK		AGENT CASHIER CHECK		BANK CASHIER'S CHECK																									
THE ATTACHED CHECKS AND/OR CASH IN THE AMOUNT OF \$ SHOULD BE TAKEN INTO ACCOUNT AS INDICATED BELOW.																															
I HEREBY AUTHORIZE MY AGENT, WHOSE SIGNATURE APPEARS BELOW, TO RECEIVE \$ OF OFFICIAL FUNDS IN CURRENCY ON MY BEHALF.																															
DATE		SIGNATURE OF PAYEE			DATE		SIGNATURE OF AGENT			DATE		SIGNATURE OF RECIPIENT																			
DESCRIPTION-ALL OTHER ACCOUNTS 13-33		28-33 T/A NO.		34-39 STATION CODE		40-42 EXPEND CODE		43 F U N D S		45-46 PAY PER. LIQ. CODE		47-52 OBLIG. REF. NO.		53 CA YR		54-57 GENERAL LEDGER ACCT. NO.		58-67 ALLOT. OR COST ACCT. NO.		68-70 DUE DATE		71-80 AMOUNT									
DESCRIPTION-ADVANCE ACCOUNTS 13-27		P.O. NO.		PROP. NO.		PROJECT NO.		FY		S		ADVANCE ACCT. NO.		EMP. NO.		GENERAL LEDGER ACCT. NO.		62-67 CK. NO. X REF. NO.		OBJECT CLASS		DEBIT		CREDIT							
<i>Sanctus Assoc Inc.</i>												1420				601.0		61-0572-0009		740		14,332.77		14,332.77							
																135.0								14,332.77							
<i>Regional & 1 Address</i> <i>1 Contract NH-1420 (Post)</i> <i>1- Voucher</i>																															
DATE		AUTHORIZED CERTIFYING OFFICER			DATE		TOTALS		14,332.77		14,332.77																				

O. YOU. NO. _____
03 28
BU. YOU. NO. _____

Use continuation sheet(s) if necessary

U. S. _____ (Department, bureau, or establishment)
Voucher prepared at NASHUA, NEW HAMPSHIRE OCT 25, 1963
 _____ (Give place and date)

Payee's Account No. _____ Discount Terms _____

TO SANDERS ASSOCIATES, INC
(Payee) P O BOX 860 CHURCH ST STATION
NEW YORK 8, NEW YORK

PAID BY

(Address)		Date		Invoice Rec'd.	
Contract No. AF33(657)8582		Req. No.		Govt. B/L No.	
Shipped from LOT 11 to		Weight			
				UNIT PRICE	
				AMOUNT	

Shipped from		LOT 11	to	Weight	UNIT PRICE		AMOUNT
No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)			Quantity	Cost	Per
	20 SEPT THRU 30 SEPT 1963	FORWARD FROM ANALYSIS OF COSTS SUPPLEMENT					
INVOICE NO 1XFP-13-22313							
COST REIMBURSABLE							\$ 14,332.77
					TOTAL		\$ 14,332.77
(PAYEE MUST NOT USE THIS SPACE)							

(PAYEE MUST NOT USE THIS SPACE)

PAYMENT:

COMPLETE ☐

PARTIAL ☐

FINAL ☐

PROGRESS ☐

ADVANCE ☐

DIFFERENCES

Amount verified; correct for _____
(Signature or initials) _____

Pursuant to authority vested in me, I certify that

† Approved for _____ = \$ _____

By _____

Exchange rate _____ = \$1.00

22 NOV
1963

(Date) _____

CONTRACTING OFFICER

ITTEN AGREEMENT IN ANY FORM

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE

ACCOUNTING CLASSIFICATION (REVISED 12-04)

[illegible]

I.R.No's.

Project Order Date	
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I.R.No's. _____ on Treasurer of the United States

Paid by { Check No. _____ on _____ (Name of Bank)

Cash, \$ _____, on _____, 19____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

* If the ability to certify and authority to approve are combined in one person, one signature only is required; otherwise the approving officer will sign on the line below "Approved for \$ _____", or his official title.

Per _____

Title _____

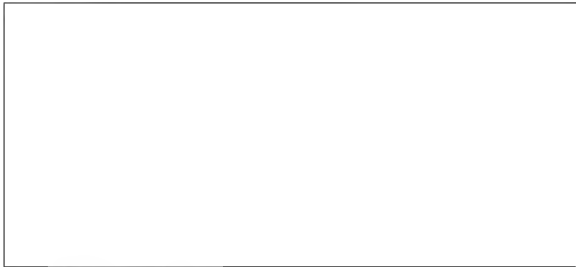
9/20 - 9/30/63

CURRENT

Nov 1 4 01 PM '63

P. O. Box 232
Nashua, New Hampshire
MV-157
30 October 1963

STAT

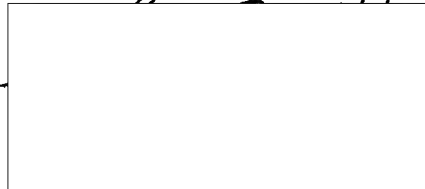


Dear Joe:

Attached please find invoice #10 on Contract NH-8420
and invoice #28 on Contract AF33(657)8582.

STAT

Very truly yours,



EGB/mns

Enclosures